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| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | | Application Number | 09/882,046 |
| | | Filing Date | June 18, 2001 |
| | | First Named Inventor | Marcos C. TZANNES et al. |
| | | Group Art Unit | Unknown |
| | | Examiner Name | Ex. TORRS |
| Total Number of Pages in This Submission | | Attorney Docket Number | T3653-8966US01 |

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| ENCLOSURES (check all that apply) | | |
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Other Enclosure(s) (please identify below) |
| Remarks | | <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 50-1165 (T3653-8966US01) for the above identified docket number. |

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| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | |
| Firm or Individual name | <u>Jason H. Vick, Reg. No. 45,285</u> Miles & Stockbridge P.C. 1751 Pinnacle Drive Suite 500 McLean, VA 22102 |
| Signature | |
| Date | March 18, 2004 |

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